



Maryland Medicaid

Maternal and Child Health Overview

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Agenda

- History
- Benefits and programs
- Performance
- Innovation
- Collaboration

History of Medicaid

- Enacted in 1965 under Title XIX of the Social Security Act
- Created to provide medical care to the indigent and medically needy individuals and families
- Jointly-financed with federal and State funds
 - Federal contribution based on the per capita income of a state (generally a 50-50 match rate in Maryland)
- Each state develops policy and implements program within federal rules
- Program has mandatory and optional beneficiaries and services
- Program administration through a State Plan approved by the Centers for Medicare and Medicaid Services (CMS)

Medicaid's Role as Health Insurer

- Medicaid has one of the most comprehensive benefit packages
 - Long-term services and supports (LTSS)
 - Therapies for children
- Medicaid provides supplemental coverage for many people
 - Medicare beneficiaries
 - Some individuals who have commercial insurance in addition to Medicaid
 - Medicaid is the payer of last resort—any other insurance pays first
- Medicaid is estimated to account for about 29.7 percent of total state spending from all fund sources (FY 2018), increasing from 20.5 percent in FY 2008. It is the single largest portion of total state expenditures. (Source: National Association of State Budget Officers, 2018)

Maryland Medicaid

- Major pathways to eligibility for MCH populations
 - Pregnant women, families and children
 - Aged, blind and disabled
 - Adults under 65
 - Maryland Children's Health Program (MCHP) and MCHP Premium
- Over 85 percent enrolled in HealthChoice managed care demonstration—approximately one in five Marylanders

HealthChoice Managed Care

Under HealthChoice, Maryland requires most Medicaid beneficiaries to enroll in one of nine participating managed care organizations (MCOs), including individuals with disabilities and children in foster care:

1. Aetna Better Health
2. Amerigroup Community Care
3. Jai Medical Systems
4. Kaiser Permanente
5. Maryland Physicians Care
6. MedStar Family Choice
7. Priority Partners
8. University of Maryland Health Partners
9. United Healthcare

Fee-for-Service

FFS populations:

- Dual eligibles
- Institutionalized
- Spend-down
- Model Waiver
- Family Planning program
- Rare and Expansive Case Management (REM) participants (must first be HealthChoice-eligible)
- Newly-eligible enrollees

Carved-out services:

- Specialty mental health and substance use disorder services
- Long-term services and supports
- Comprehensive dental care
- Certain drugs

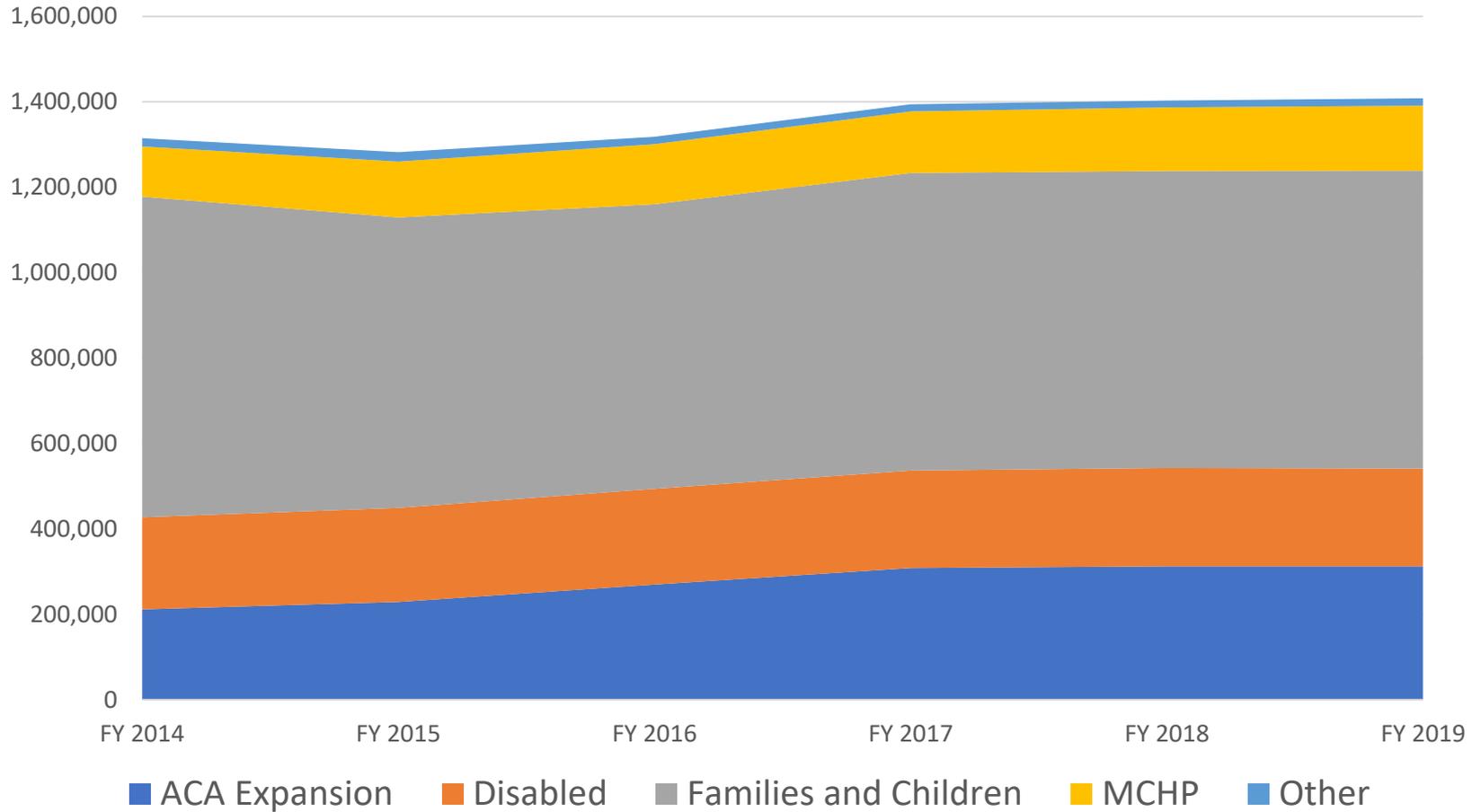
Home- and Community-Based Services Waivers

- Maryland has six 1915(c) home- and community-based services (HCBS) waivers.
 - Living at Home and Older Adults waivers merged in 2014
 - The New Directions waiver merged into the Community Pathways Waiver in 2014
- There is a high demand for waiver services.

Waiver	No. Enrolled
Community Pathways	15,496
Medical Day Care	4,910
Children with Autism Spectrum Disorder	1,218
Model Waiver for Medically-Fragile Children	204
Individuals with Traumatic Brain Injury	110
Community Options	4,730

Enrollment

Maryland Medicaid Enrollment by Coverage Type



Federally-Mandated Benefits

- Hospital care (inpatient and outpatient)
- Nursing home care
- Physician services
- Laboratory and X-ray services
- Immunizations and other early and periodic screening, diagnosis and treatment (EPSDT) services
- Family planning services and supplies
- Federally-Qualified Health Centers (FQHCs) and rural health clinic services
- Nurse midwife and nurse practitioner services

Optional Benefits Covered in Maryland

- Adult expansion population
- Prescription drugs
- Home- and community-based care under waivers
- Personal care, medical day care and other community-based services for individuals with disabilities
- Rehabilitation and other therapies
- Clinic services
- Durable medical equipment and supplies
- Mental health and substance abuse treatment services

Note: All medically-necessary services are mandatory for children through EPSDT

EPSDT

- In Maryland, the preventive care component of the Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) Program is known as the **Healthy Kids Program**.
- Maryland Healthy Kids/EPSDT Program promotes access to and assures availability of quality health care for Medical Assistance children, teens and young adults less than 21 years of age.
- Standards for the Healthy Kids Program are developed through collaboration with key stakeholders.
- The *Maryland Schedule of Preventive Health Care* closely correlates to the American Academy of Pediatrics' periodicity schedule.

Performance

- HealthChoice performs above the national mean in measures related to...
 - Maternal health: Antenatal care, postpartum care
 - Child and adolescent health: Well visits, primary care provider access, immunizations, lead screening, weight assessment and nutritional and physical activity counseling
- Screening, Brief Intervention and Referral to Treatment services more than tripled between CY 2015 and CY 2017

Recent Innovation

- Home Visiting Services pilot
- Assistance in Community Integration Services pilot
- HealthChoice Diabetes Prevention Program
- Grant opportunities
 - Maternal Opioid Misuse
 - Integrated Care for Kids

Collaboration

- MCH Bureau
- Total Cost of Care Model
 - Multi-payer quality programs: Readmissions, Quality-Based Reimbursement, Hospital-Acquired Conditions, Potentially-Avoidable Utilization
 - Population health goals

Questions?

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